



Service Bench Instructions for Warranty Claiming

CEMA WARRANTY TEAM

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Warranty Check/Start New Claim

- ❖ Hover over to Claims-Select Entitlement and check green check mark
- ❖ **Enter serial number only**** and search (in the event there are multiple models having the same serial number a list of those models will be presented and selection is necessary) ***Always choose the shorter number for outdoor units***
- ❖ All information for the number will be displayed. If registered, homeowner info and warranty length will be shown
- ❖ Optional coverage (purchased) is displayed, including contract number, homeowner information, plan description, contract effective dates
- ❖ If already registered, check product history for any claims. Claim history for the specific serial number will be displayed. If not a duplicate, go to new claim
- ❖ If not registered, Enter install date and application type and Search. Select new claim

Product History

Entitlement Search

Service Administrator	United Technologies Corporation
Model Number	2868NA048000
Serial Number *	0911E15385
First Name	
Last Name	
Phone	
Service Contract Number	

Check Entitlement

Purchase Date	
Purchased From	

Product Name:	16S.EVOLUTION HP 2-STAGE 4 TON
Model Number:	2868NA048000
Serial Number:	0911E15385
Owner:	Bersani, Tom
Date Installed:	06/27/2011
Warranty Policy Code:	CP6
Warranty Policy Description:	5 YR ALL PARTS
Standard Labor Warranty Expiration Date:	
Standard Part Warranty Expiration Date:	
Registered On Time	No
Enhanced Warranty	Yes
Mark As:	
Replacement Of Model:	
Replacement Of Serial Number:	

Warranty Information

Brand	Application Type	Equipment Owner	Component Code	Warranty Length	Installed After	Warranty Start	Warranty Stop
ALL	Owner Occupied Residential	ALL	Enhanced Parts Warranty	10 years	01/01/2005	06/27/2011	
			Accessory Exchange	30 days			07/27/2011

Service Contracts

Contract Number	RL149174607
Cancelled/Reason	
Model Number	2868NA048000
Model	16S.EVOLUTION HP 2-STAGE 4 TON
Serial Number	0911E15385
Owner	Bersani, Tom
Address	119 SOTHERDEN DR LIVERPOOL, NY 13090
Phone	315-432-3266
Date of Purchase	06/27/2011

Plan Number	Plan Type	Plan Name	Contract Start Date	Contract End Date
L106181	Labor	10 LBR HP-FHCL PLN B 3L	07/28/2011	06/27/2021

Search New Claim New Service Order Change Service Administrator

Standard Claim in Service Bench

*****Prior to claim entry, verify all information (invoice, actual part# ordered, bulletin) and have paperwork available*****

- ❖ Start claim from Entitlement-Hover over to Claims-Select Entitlement
 - ❖ Select green check mark and enter **Serial Number Only** and enter
 - ❖ Verify warranty. Check product history. If claim should be submitted, proceed to new claim
 - ❖ Reference Number- Choose a number that you can reference credit. Ex. Po#, home owner last name, etc.
1. Select warranty Type=Standard Warranty
 2. Enter install date if not auto-populated
 3. Complete customer information section if not auto-populated
 4. Select application type-Residential, Other Residential (apartments, rental property) or Commercial
 5. Select original equipment owner Y/N
 6. Enter failed date and repair date
 7. Enter failed part and replacement part information. Magnifying glass look-up tool available. Serial number required for all compressors

*****Compressor claims only*** Failed compressor part number must be the same as the replaced compressor part number**



8. Replacement part invoice number is required. (Carrier billing order# not po#)
9. Indicate the causal part (which part caused the failure)
10. Select appropriate Labor Repair Type for DOA
11. Provide a complete description of service performed. This is critical information necessary to process claim. Why was the service call made? What was found to be wrong? What was done to repair unit or correct problem?
12. Hit SAVE-to enable system to auto-populate the appropriate Component code
13. Select the appropriate defect code
At this point, system will also identify any problems with your submittal data
Make any necessary corrections
14. Hit SUBMIT
15. If part needs to be returned, system will attach parts packing slip

Standard Claim

Manufacturer	UTC - United Technologies Corporation		
Dealer	556695017 - ADMIN TEST DEALER	Dealer Location	556695017 - ADMIN TEST DEALER
Distributor	556694995 - ADMIN TEST DISTRIBUTOR	Distributor Location	556694995 - ADMIN TEST DISTRIBUTOR
Reference Number	FLA1		
Model Number*	FV4CNB006T00	<input type="checkbox"/> Competitive Equipment	
Serial Number	2811A81834	<input type="checkbox"/> Stock Unit	
Warranty Type * 1	Standard Warranty	Unit Installed/Startup Date 2	02/01/2012
***** Hit the SAVE key to auto populate the unit registration information			

Customer Information 3			
Company Name			
First Name	Tom	Last Name	Bersani
Address Line 1*	119 Sotherden	Address Line 2	
City, State/Province, Postal Code*	Liverpool NY 13090		
Country *	UNITED STATES		
Email	tom.bersani@carrier.utc.com		
Phone 1*	3154326846	Phone 2	3154323266
Application Type 4	Owner Occupied Residential	Installing Homeowner 5	Yes

Service Detail Information			
Fail Date* 6	02/15/2012	Repair Date * 6	02/15/2012
Optional Contract Number			
Bulletin/Authorization Number		<input type="checkbox"/> Credit Card Payment	
***** If the unit has been replaced fill in the New Model and Serial fields			
Replacement Model Number		Replacement Serial Number	
Replacement Invoice Number		Replacement Unit Price	
Replacement Disposition		Replacement Mark Up	
Replacement Approved Amount			

Number of Part Lines														
4														
 Causal Part	Failed Part Quantity	Failed Part Number	Failed Part Serial Number	Failed Part Install Date	 Competitor Part	Replaced Part Quantity	Replaced Part Number	Replaced Part Description	Replaced Part Serial Number	Replaced Part Invoice Number	Part Disposition	Unit Price	Part Mark Up	Part Price Extended
<input checked="" type="checkbox"/>	1	HD 46AR 244			<input type="checkbox"/>	1	HD 46AR 244	MOTOR, FAN		8				
9		7					7							
<input type="checkbox"/>					<input type="checkbox"/>									
<input type="checkbox"/>					<input type="checkbox"/>									
<input type="checkbox"/>					<input type="checkbox"/>									

Quality Information			
Model Location		Furnace Orientation	
Gas Furnace Fuel		Component Code	M100
Labor Repair Type * 10	DOA MINOR COMPONENT		
Service Performed 11	no heat situation, diagnosed and found propeller seized; shaft misalignment, replaced motor		
Defect Code 13	M106 - Prop failure/seized to shaft		

Item	Requested
Total Parts	
Labor Hours	
Labor Rate	
Labor Amount	
Tax Amount(For U.S Claims Only)	
Freight Amount	
Lbs. Refrigerant	
Refrigerant Price per lb.	
Refrigerant Amount	
Service Materials Amount	
Drive-Up Amount	
Diagnostic Amount	
Admin Allowance Amount	
Handling Fee	

Click SAVE to save a draft of the claim. Click Submit to process the claim.

New Comment	External

New	New - Same Customer	New - Same Repair	Save	Delete Claim	Submit	Escalation
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Standard Claim with Qualifying DOA Labor

- ❖ Follow same steps for standard claiming
- ❖ Select appropriate Labor Repair Type for DOA (DOA=30 days from original installation only)
- ❖ Hit SUBMIT

The screenshot shows the ServiceBench web application interface. The top navigation bar includes links for HOME, CLAIMS, CONTRACTS, REGISTRATIONS, REPORTS, and ADMIN. The main content area is titled 'QUALITY INFORMATION' and contains several form fields. A dropdown menu is open for the 'Labor Repair Type' field, showing options: 'NO DOA LABOR', 'DOA MINOR COMPONENT', 'DOA PRIMARY HEAT EXCHANGER', 'DOA LEAK REPAIR COIL 1 - 5 TONS', 'DOA LEAK REPAIR VALVES', 'DOA COMPRESSOR AC HP SPP 1 - 5 TONS', and 'SECONDARY HEAT EXCHANGER DOA LEAK REPAIR TUBING'. The 'Diagnosis' section has a text area for 'Why was the service call made? What was found to be wrong? What was done to repair unit or correct?'. The 'Defect Code' field is also visible. On the right, there are fields for 'Furnace Orientation', 'Component Code', and a table for 'Total Parts' with columns 'Item' and 'Requested'. The table shows 'Total Parts' with a value of '\$0.00'. Below the table are fields for 'Labor Hours', 'Labor Rate', 'Labor Amount', 'Tax Amount(For U.S Claims Only)', and 'Freight Amount'. At the bottom, there are 'SAVE' and 'SUBMIT' buttons.

Model Location

Gas Furnace Fuel

Labor Repair Type * **NO DOA LABOR**

Diagnosis
Why was the service call made?
What was found to be wrong?
What was done to repair unit or correct?

Defect Code

Furnace Orientation

Component Code

Item	Requested
Total Parts	\$0.00
Labor Hours	<input type="text"/>
Labor Rate	<input type="text"/>
Labor Amount	<input type="text"/>
Tax Amount(For U.S Claims Only)	<input type="text"/>
Freight Amount	<input type="text"/>

SAVE **SUBMIT**

Service Part Claim on Out of Warranty Unit

- ❖ Start Claim from entitlement screen (unless repairing competitive equipment)
- ❖ Select Warranty type=Service Part
- ❖ Follow same steps for standard claiming
- ❖ A failed part install date is required for all service part claims-enter failed date on parts line (failed part purchase must be from 1 year)
- ❖ No DOA labor for service parts Hit SUBMIT

https://www.servicebench.com/servlet/WebSideServlet ServiceBench | Warranty Cl...

File Edit View Favorites Tools Help

1 Alerts celtfcp Help

HOME CLAIMS CONTRACTS REGISTRATIONS REPORTS ADMIN

Serial Number 2707X39468 ☐ Stock Unit
Warranty Type * Service Parts Unit Installed/Startup Date 110707

***** Hit the SAVE key to auto populate the unit registration information

CUSTOMER INFORMATION

Company Name
First Name TEST Last Name CLAIM
Address Line 1* 1234 TEST DRIVE Address Line 2
City, State/Province, Postal Code* RICHMOND VA 23224
Country * UNITED STATES
Email
Phone 1 8049991234 Phone 2
Application Type Owner Occupied Residential Original Equipment Owner YES

SERVICE DETAIL INFORMATION

Fail Date* 010217 Repair Date * 010317
Optional Contract Number
Bulletin/Authorization Number ☐ Credit Card Payment
***** If the unit has been replaced fill in the New Model and Serial fields
Replacement Model Number Replacement Serial Number
Replacement Invoice Number Replacement Unit Price
Replacement Disposition Replacement Mark Up
Replacement Approved Amount Requested Replacement Amount

Number of Part Lines 4

?	Failed Part Quantity	Failed Part Number	Failed Part Serial Number	Failed Part Install Date	?	Competitor Part	Replaced Part Quantity	Replaced Part Number	Replaced Part Description	Replaced Part Serial Number	Replaced Part Invoice Number	Part Disposition	Unit Price
<input checked="" type="checkbox"/>	1	HN67QC005		100616	<input checked="" type="checkbox"/>			HN67QC005			39223074		
<input type="checkbox"/>					<input type="checkbox"/>								

SAVE SUBMIT

100%

Accessory Exchange Claim

- ❖ Start Claim from entitlement screen with serial number of the failed accessory (Not ODU/IDU)
 - ❖ Select Warranty type=**Unit Exchange**
 - ❖ Fill out customer information as normal
 - ❖ Enter the replacement model, serial and Carrier invoice number in the designated fields (Unit price only for Optional Labor Contracts)
 - ❖ Provide a complete description of service performed
 - ❖ Use Defect code **U109** for all Unit Exchange-no parts should be on claim
 - ❖ Hit Submit
- **Use for all thermostats, humidifiers, evaporator coils, air purifiers, units with compressor failure first 30 days etc. Ex. SYS, CNPV, T2, TB, TC, HUM, GAP, ZONE, etc.**

Reference Number: CLAIM1STAT

Model Number*: SYSTXCCUID01-B

Serial Number: 1117W001235

Warranty Type*: Unit Exchange

Competitive Equipment: ☐

Stock Unit: ☐

Unit Installed/Startup Date: 020217

***** Hit the SAVE key to auto populate the unit registration information

CUSTOMER INFORMATION

Company Name:

First Name: TEST Last Name: CLAIM

Address Line 1*: 1234 TEST DRIVE Address Line 2:

City, State/Province, Postal Code*: RICHMOND VA 23224

Country*: UNITED STATES

Email:

Phone 1: 8049991234 Phone 2:

Application Type: Owner Occupied Residential Original Equipment Owner: YES

SERVICE DETAIL INFORMATION

Fail Date*: 021517 Repair Date*: 021517

Optional Contract Number:

Bulletin/Authorization Number:

Credit Card Payment: ☐

***** If the unit has been replaced fill in the New Model and Serial fields

Replacement Model Number: SYSTXCCUID01-C

Replacement Serial Number: 1117W999123

Replacement Invoice Number: 39876543

Replacement Unit Price:

Replacement Disposition:

Replacement Mark Up:

Replacement Approved Amount:

Requested Replacement Amount:

Number of Part Lines: 4

?	Failed Part	Failed Part Quantity	Failed Part Number	Failed Part Serial Number	Failed Part Install Date	?	Competitor Part	Replaced Part Quantity	Replaced Part Number	Replaced Part Description	Replaced Part Serial	Replaced Part Invoice	Part Disposition	Unit Price	Part Mark Up	Part Price Extended
SAVE	SUBMIT															

Accessory Claiming Guide

Failed Device	Model Description	Claimed As	Base Model
SYSTXBBNIM01-, SYSTXCCNIM01-	Network Interface Module	Part	SYSTXBBUID01-, SYSTXCCUID01-
SYSTXBBSAM01-, SYSTXCCSAM01-	System Module	Part	SYSTXBBUID01-, SYSTXCCUID01-
SYSTXBBRCT01-, SYSTXCCRCT01-	Remote Access Broadband CATS	Part	SYSTXBBUID01-, SYSTXCCUID01-
SYSTXBBRWF01-, SYSTXCCRWF01-	Remote Access Broadband Wi-Fi	Part	SYSTXBBUID01-, SYSTXCCUID01-
SYSTXBBUID01-, SYSTXCCUID01-	User Interface Controller	Unit Exchange	SYSTXBBUID01-, SYSTXCCUID01-
SYSTXBBUIZ01-, SYSTXCCUIZ01-	Zoning Control	Unit Exchange	SYSTXBBUIZ01-, SYSTXCCUIZ01-
SYSTXBB4ZC01-, SYSTXCC4ZC01-	Zone Damper Control Board	Unit Exchange	SYSTXBB4ZC01-, SYSTXCC4ZC01-
SYSTXBBSMS01-, SYSTXCCSMS01-	Smart Sensor	Part	ZONEBB_KIT01-, ZONECC_KIT01-
SYSTXBRRS01-, SYSTXCCRS01-	Remote Room Sensor	Part	ZONEBB_KIT01-, ZONECC_KIT01-
ZONEBB_KIT01-, ZONECC_KIT01-	Zone Kit	Unit Exchange	ZONEBB_KIT01-, ZONECC_KIT01-
T6, T2, T1, TP, TC, TB, TSTAT Series	Thermostats	Unit Exchange	T6, T2, T1, TP, TC, TB, TSTAT Series
P SERIES THERMOSTATS	Totaline Thermostats	Part	AC, HP, FURNACE
DAMP SERIES	Dampers	Part	ZONEBB_KIT01-, ZONECC_KIT01-
GAPA SERIES	Air Purifiers	Unit Exchange	GAPA SERIES
AIRA SERIES	Electronic Air Cleaners	Unit Exchange	AIRA SERIES
EAC SERIES	Electronic Air Cleaners	Unit Exchange	EAC SERIES
HUM SERIES	Humidifiers	Unit Exchange	HUM SERIES
UVLB_, UVLC_ SERIES	UV Light	Unit Exchange	UVLB_, UVLC_ SERIES
UVLXXRPL1020-A10	UV Replacement Lamp	Part	UVLB_, UVLC_ SERIES

Optional Parts and Labor Claim

- ❖ Start Claim from entitlement screen-copy optional contract number
- ❖ Select Warranty Type=Optional Contract
- ❖ Fill out claim as normal
- ❖ Enter optional contract number that was copied in optional contract# field
- ❖ Fill out parts line as normal
- ❖ Enter cost for replacement part in **Unit Price** on parts line
- ❖ Leave Labor Repair Type set to No DOA Labor
- ❖ Provide a complete description of service performed
- ❖ Enter refrigerant pounds (compressor only), tax (if applicable) and service materials per policy
- ❖ Save claim for defect code and identify any problems with your submittal data and Hit Submit

The screenshot shows the ServiceBench web application interface. The browser address bar displays <https://www.servicebench.com/servlet/WebSideServlet>. The page has a navigation bar with tabs: HOME, CLAIMS, CONTRACTS, REGISTRATIONS, REPORTS, and ADMIN. The main form is titled "SERVICEBENCH" and contains the following sections:

- Header Information:**
 - Serial Number: 1917EH2345
 - Warranty Type: Optional Contract
 - Unit Installed/Startup Date: 020217
- CUSTOMER INFORMATION:**
 - Company Name: [Empty]
 - First Name: TEST
 - Last Name: CLAIM
 - Address Line 1: 1234 TEST DRIVE
 - Address Line 2: [Empty]
 - City, State/Province, Postal Code: RICHMOND, VA, 23224
 - Country: UNITED STATES
 - Email: [Empty]
 - Phone 1: 8049991234
 - Phone 2: [Empty]
 - Application Type: Owner Occupied Residential
 - Original Equipment Owner: YES
- SERVICE DETAIL INFORMATION:**
 - Fail Date: 021517
 - Repair Date: 021517
 - Optional Contract Number: VA1235986496 (highlighted with a blue arrow)
 - Bulletin/Authorization Number: [Empty]
 - Credit Card Payment: [Empty]
 - Replacement Model Number: [Empty]
 - Replacement Serial Number: [Empty]
 - Replacement Invoice Number: [Empty]
 - Replacement Unit Price: [Empty]
 - Replacement Disposition: [Empty]
 - Replacement Mark Up: [Empty]
 - Replacement Approved Amount: [Empty]
 - Requested Replacement Amount: [Empty]
- Number of Part Lines:** 4
- Table of Part Lines:**

Causal Part	Failed Part Quantity	Failed Part Number	Failed Part Serial Number	Failed Part Install Date	Competitor Part	Replaced Part Quantity	Replaced Part Number	Replaced Part Description	Replaced Part Serial Number	Replaced Part Invoice Number	Part Disposition	Unit Price	Part Mark Up	Part Price Extended
<input checked="" type="checkbox"/>	1	03KCE-TF5-950	17AB1236L		<input type="checkbox"/>	1			17AC9985L	30876543		355.00		
- Buttons:** SAVE, SUBMIT

Common Claim Errors

- ❖ **Install date before ship date**-Check the ship date in entitlement and verify purchase date
- ❖ **Proof of install**-installation date is past warranty threshold. POI will need to be attached to claim Ex. 2006 unit installed in 2012
- ❖ **Invalid Component code**-Part is not a part of the unit listed or part is not a covered warranty part. Ex. Compressor is not in a furnace Ex. Doors, nozzles... Claim not warranted parts
- ❖ **Repair exceeds normal limits for unit**-Multiple claims within 30 days or more than 3 labor claims within 3 months.-must put explanation in **NEW COMMENT FIELD** and DSM will review claim
- ❖ **Duplicate Reference Number**-Same reference number used on another claim. Save as new claim and alter the reference number and submit claim
- ❖ **Failed Serial Syntax does not match Failed Part**-Serial# listed is incorrect. Verify format and make corrections
- ❖ **Part not listed in part lookup**- Verify correct part number is being entered and if part is FAP part (factory authorized part) If so, verify if should be claimed as an unit exchange Ex. SYSTXCCITC01 is a unit exchange
- ❖ **Duplicate Claim**-Identical claim has been submitted. Check product history to verify

Customer Service is our top priority. CE Mid-Atlantic wants to make sure that you are comfortable and knowledgeable with our system. Therefore, we provide a variety of customer support options for your convenience. Please feel free to contact us with any questions you may have.

Email: cma.warranty@carrierenterprise.com Phone: 1-866-902-4822 opt 5

Should you forget your password, you can use the 'forgot password' option or you can contact ServiceBench at 1-877-472-3624 and provide your Company ID above and they can reset your account.